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Pandiscio & Pandiscio 470 Totten Pond Road Waltham, MA 02154

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Margaret M.	Carley	(Depositor's name)
may	t m carley	(Signature)
10/20/20 0 9	0	(Date)

CONFIRMATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. APPLICATION NO. **FILING DATE** 8764 NEURO-NRO-008 02/14/2002 Shai N. Gozani 10/075,217

TITLE OF INVENTION: APPARATUS AND METHOD FOR PERFORMING NERVE CONDUCTION STUDIES WITH LOCALIZATION OF EVOKED RESPONSES

BY S MADEN

nonprovisional YES \$755 \$300 \$0 \$1055 12/22/20 EXAMINER ART UNIT CLASS-SUBCLASS HOEKSTRA, JEFFREY GERBEN 3736 600-554000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Tobalization for Sagnature and the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
EXAMINER ART UNIT CLASS-SUBCLASS HOEKSTRA, JEFFREY GERBEN 3736 600-554000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) NeuroMetrix, Inc. Waltham, MA Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity General Country (Country) Description of the patent attorneys or agents and the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of up to 3 registered patent attorneys or agents or agents OR, alternatively, (2) the name of up to 3 registered patent attorneys or agents or agents OR, alternatively, (2) the name of up to 3 registered patent attorneys or agents or agents OR, alternatively, (3) the names of up to 3 registered patent attorneys or agents or agents OR, alternatively, (4) the names of up to 3 registered patent attorneys or agents or agents OR, alternatively, (2) the name of up to 3 registered patent attorneys or agents or agents OR, alternatively, (2) the name of up to 3 registered patent attorneys or agents or agents OR, alternatively, (3) the names of up to 3 registered patent attorneys or agents or agents OR, alternatively, (4) the names of up to 3 registered patent attorneys or agents or agents OR, alternatively, (5) the name of up to 3 registered patent attorneys or agen	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
HOEKSTRA, JEFFREY GERBEN 3736 600-554000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) NeuroMetrix, Inc. Waltham, MA Please check the appropriate assignee category or categories (will not be printed on the patent): I pandiscio & Pand: (1) the names of up to 3 registered patent attorneys or agents and member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents and member a registered attorney or agents or agents of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Waltham, MA	nonprovisional	YES	\$755	\$300	\$0	\$1055	12/22/2009
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE NeuroMetrix, Inc. Pandiscio & Pand: (1) the names of up to 3 registered patent attorneys or agents and the names of up to 2 registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 1 itsted, no name will be printed. Pandiscio & Pand: (1) the names of up to 3 registered patent attorneys or agents of up to 2 registered attorney or agents of up to 3 registered patent attorneys or agents. If no name is 1 itsted, no name will be printed. Pandiscio & Pand: (1) the names of up to 3 registered patent attorneys or agents. If no name is 1 itsted, no name will be printed. Pandiscio & Pand: (1) the names of up to 3 registered patent attorneys or agents. If no name is 1 itsted, no name will be printed. Pandiscio & Pand: (1) the names of up to 3 registered patent attorneys or agents. If no name is 1 itsted, no name will be printed. Pandiscio & Pand: (1) the names of up to 3 registered patent attorneys or agents. If no name is 1 itsted, no name will be printed. Pandiscio & Pand: (1) the names of up to 3 registered patent attorneys or agents. If no name is 1 itsted, no name will be printed. Pandiscio & Pand: (1) the names of up to 3 registered patent attorneys or agents. If no name is 1 itsted, no name will be printed. Pandiscio & Pand: (1) the names of up to 3 re	EXAI	MINER	ART UNIT	CLASS-SUBCLASS]		
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address' indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE NeuroMetrix, Inc. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Waltham, MA Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Go	HOEKSTRA, JE	EFFREY GERBEN	3736	600-554000			
NeuroMetrix, Inc. Waltham, MA Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Go	CFR 1.363). Change of corres Address form PTO/S "Fee Address" in PTO/SB/47; Rev 03 Number is required ASSIGNEE NAME PLEASE NOTE: U recordation as set fo	spondence address (or Che SB/122) attached. ndication (or "Fee Address 1-02 or more recent) attac d. AND RESIDENCE DAT Inless an assignee is iden orth in 37 CFR 3.11. Com	ange of Correspondence s" Indication form hed. Use of a Customer A TO BE PRINTED ON	(1) the names of up to or agents OR, alternati (2) the name of a single registered attorney or 2 registered patent attolisted, no name will be THE PATENT (print or tyeld data will appear on the port a substitute for filing an	o 3 registered patent attorvely, le firm (having as a membagent) and the names of unreys or agents. If no name printed. pe) patent. If an assignee is it assignment.	oper a 2	
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Authorized Signature Margaret M Carley Date 10/20/2009 Typed or printed name Margaret M Carley Registration No. 55,625	_		1	mley			

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(Signature)	ugut M Conley	may
(Date)		10/20/20/9

APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	AT	ORNEY DOCKET NO.	CONFIRMATION NO
10/075,217	02/14/2002		Shai N. Gozani	1	NEURO-NRO-008	8764
TITLE OF INVENTION: A RESPONSES	APPARATUS AND M	ETHOD FOR PERFOR	RMING NERVE CONDUC	TION STUDIES WITH	LOCALIZATION OF	EVOKED
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nonprovisional	YES	\$755	\$300	\$0	\$1055	12/22/2009
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